## Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>01/15/10</u>	Address:	TENTH AND UNION STREETS
Case #:	<u>43F27798</u>		COLUMBUS, INDIANA
County:	BARTHOLOMEW		<u>47201</u>
Type of Laboratory Seizure (check one)  ☐ Operational Lab ☐ Chemical/Glassware/Equipment (only) ☐ Dumpsite (only)		Seizure Location (compared Residence Outbuilding Vehicle	check all that apply)  Hotel/Motel Open – No Structure Other:
Items Found: Location (bedroom, kitchen, open air, etc) (check all that apply)			
Lithium/Ammonia Reaction(s):			
Red Phosphorous/Iodine Reaction(s):			
Flammable Solvents:			
Water Reactive Metal (Lithium):			
Anhydrous Ammonia: <u>VALVE SYSTEM</u>			
Hydrochloric Acid Gas Generator(s):			
Corrosive Acid:			
Corrosive Base:			
Other (item and location):			
Child under age 18 discovered (check one)  ☐ Yes (number present)  ☐ No  *If yes, fax report to Child Protective Services		Investigative Information  ☐ Ephedrine/Pseudoephedrine Tracking Log ☐ Retail/Merchant Tip ☐ Other:LEO ACTION	
This report is to be faxed to the following agencies that serve the location:			
Fire Depar	tment: <u>C.F.D.</u>	Fax: <u>E-MAIL</u>	
Health Dep	Department:         B.C.H.D.         Fax:         E-1		<del>.</del>
Child Protection Service:			
For further information regarding this methamphetamine laboratory, contact Investigating Officer: CHIP AYERS Phone 317.234.4591			

- \*\* This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.
- \*\*\* This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.